CALIFORNIA HORSE RACING BOARD

1010 Hurley Way, Suite 300 Sacramento, CA 95825 www.chrb.ca.gov (916) 263-6000 Fax (916) 263-6042



Postmortem Examination Review Summary #123

Horse Information: 4-year-old Thoroughbred.

<u>Incident Summary</u>: This horse was injured while racing. The veterinarian sedated and evaluated the horse. A Kimzey splint was applied, and the horse was vanned to the equine hospital. The horse was treated with flunixin meglumine, phenylbutazone, detomidine, butorphanol. Radiographs were obtained and a laceration was noted after the limb was unbandaged. A poor prognosis for a successful surgery was given by the equine surgeon. The horse was sedated with xylazine and euthanized with pentobarbital.

<u>Necropsy Summary:</u> A necropsy examination revealed open proximal sesamoid bone fractures in the right forelimb. An osteopenic focus was detected in the medial proximal sesamoid bone at the abaxial aspect. Additional findings were bilateral moderate to severe palmar osteochondral disease of the medial condyles.

<u>Racing/Training History:</u> This horse started training late in its 2-year-old year. The horse had a layoff from racing (and was placed on the Starter's List for loading) after nuclear scintigraphy revealed increased bone remodeling in the palmar condyles of the front cannon bones. When the horse returned to racing the trainer used daily gallops. The intervals between works were increased as not to 'do too much' in training but increase stamina without accumulating too many high-speed furlongs.

<u>Veterinary History Summary:</u> Two day pre-race medication for this horse included Adequan, phenylbutazone, and methocarbamol. The horse received furosemide prior to racing. Radiographs revealed 'palmar flattening' of the right front distal condyle of the cannon bone and the following day the right carpus was injected as effusion of the joint was noted. The horse was then placed on the CHRB Veterinarian's List for 14 days.

<u>Pre-race Examinations:</u> Recent pre-race examinations noted joint capsule hypertrophy and a decreased range of motion in both front fetlock joints, left forelimb flexor tendon sheath effusion and a choppy gait (right forelimb more than left forelimb).

Conclusion: This horse sustained sesamoid bone fractures in the right forelimb and an osteopenic focus was detected at postmortem examination. A right forelimb lameness was detected 5 ½ weeks prior to injury, however, it was believed the lameness originated from the carpus and that joint was medicated. The value of a full diagnostic workup and PET Scan was discussed for subtle and transient lameness.